

PART B - FEE(S) TRANSMITTAL



Complete and end this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Patricia Knisley

or Fax (571)-273-2885

ASTRUCTIONS: The form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where the properties. All father correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated the properties of the pr

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

03/29/2006

MICHAEL L GOLDMAN NIXON PEABODY LLP **CLINTON SQUARE** PO BOX 31051 ROCHESTER, NY 14603

JUL 0 8 2006

07/

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Signature) (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/455,978	12/06/1999	MAQSUDUL ALAM		201040/1020	5811	
TITLE OF INVENTION: H	EME PROTEINS HEMAT-	HS AND HEMA	r-bs and t	HEIR USE IN MEDICINE AN	D MICROSENSORS	
06/2006 HGUTEMA2 00000	0007 09455978					
-C+2501	700,00 DP					
8001APPLN. TYPE	SMALL 88700 Y 0P	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$0	\$700	06/29/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS		
SCHNIZER, HOLLY G		1656	,	530-385000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Nixon Peabody LLP			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.						
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON	THE PATEN	T (print or type)	· ···	
PLEASE NOTE: Unless recordation as set forth in	s an assignce is identified be n 37 CFR 3.11. Completion	clow, no assignee of this form is NO	data will app T a substitute	pear on the patent. If an assign for filing an assignment.	ec is identified below, the	document has been filed for
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
University of Hawaii			Honolulu, Hawaii			
Please check the appropriate	e assignce category or catego	ries (will not be pr	inted on the	oatent): 🗖 Individual 🖫 C	orporation or other private gi	roup entity Government
4a. The following fee(s) are	enclosed:	41	o. Payment of	Fee(s):		
🔀 Issue Fee			A check in the amount of the fee(s) is enclosed.			
☐ Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached. underpayment of, or			
Advance Order - # of Copies 10 copies			The Director is hereby authorized by charge the/required fee(s), or credit any overpayment, to Deposit Account Number 14-1138 (enclose an extra copy of this form).			
5. Change in Entity Status	(from status indicated above	:)				
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).			
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the rec	is requested to apply the Issu ublication Fee (if required) vords of the United States Pate	ue Fee and Publica will not be accepted ont and Trademark	tion Fee (if a d from anyon Office.	ny) or to re-apply any previousl e other than the applicant; a regi	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. the assignee or other party in

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Edwin V. Merkel

Authorized Signature

Typed or printed name

June 28, 2006

Registration No.

40,087